



Eric Wang <EWang@afphq.org> on 10/23/2012 11:55:50 AM

To: "2022190174@fec.gov" <2022190174@fec.gov>,
cc:

Subject: FEC Form 9

Attached, please find an FEC Form 9 from Americans for Prosperity.

Eric Wang

Americans for Prosperity
Legal Counsel

(703) 224-3190 Work
(866) 730-0150 Work
(703) 919-8840 Mobile
(703) 542-0101 Fax
EWang@afphq.org



**AMERICANS FOR
PROSPERITY.**
FOUNDATION



**AMERICANS FOR
PROSPERITY.**

<http://www.facebook.com/fightback>

<http://www.americansforprosperityfoundation.com>

<http://www.americansforprosperity.org>

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FEC Form 9 - 10.23.12.pdf

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/Obligations

(a) Name

Americans for Prosperity

(b) Address (number and street) ☐ check if different than previously reported

2111 Wilson Blvd. Suite 350

(c) City, State and ZIP Code

Arlington, VA 22201

(d) Name of Employer or Principal Place of Business

(e) Occupation

2. FEC Identification Number

C30001051

3. Is This Statement

☒ New

or

☐ Amended

4. Covering Period

10/15/2012

through

10/22/2012

5. (a) Date of Public Distribution(s) 10/22/2012 (b) Communication Title Gas Price Rollback - KFTK

6. The filer is a(n): (a) Individual (b) Unincorporated Organization (c) Qualified Nonprofit Corporation (11 CFR 114.10)

(d) ☒ Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15

(e) Other, specify: _____

7. If the filer is an individual, unincorporated organization or qualified nonprofit corporation, were the disbursements made exclusively from donations to a segregated bank account? Yes No

8. Custodian of Records

(a) Name

Steve Corder

(b) Address (number and street)

2111 Wilson Blvd. Suite 350

(c) City, State and ZIP Code

Arlington, VA 22201

(d) Name of Employer or Principal Place of Business

(e) Occupation

Americans for Prosperity

CFD

9. Total Donations This Statement

0.00

10. Total Disbursements/Obligations This Statement

11,015.00

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Tracy A. Henke

SIGNATURE

Tracy A. Henke

DATE

10.23.12

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. §437g.

List of Person(s) Sharing/Exercising Control
(use additional pages as necessary)

PAGE 2 OF 6

11. Person(s) Sharing/Exercising Control

A. (a) Name Tim Phillips	
(b) Address (number and street) 2111 Wilson Blvd. Suite 350	
(c) City, State and ZIP Code Arlington, VA 22201	
(d) Name of Employer or Principal Place of Business Americans for Prosperity	(e) Occupation President
B. (a) Name Tracy Henke	
(b) Address (number and street) 2111 Wilson Blvd. Suite 350	
(c) City, State and ZIP Code Arlington, VA 22201	
(d) Name of Employer or Principal Place of Business Americans for Prosperity	(e) Occupation Executive VP & COO
C. (a) Name Steve Corder	
(b) Address (number and street) 2111 Wilson Blvd. Suite 350	
(c) City, State and ZIP Code Arlington, VA 22201	
(d) Name of Employer or Principal Place of Business Americans for Prosperity	(e) Occupation Treasurer & CFO
D. (a) Name John Flynn	
(b) Address (number and street) 2111 Wilson Blvd. Suite 350	
(c) City, State and ZIP Code Arlington, VA 22201	
(d) Name of Employer or Principal Place of Business Americans for Prosperity	(e) Occupation Secretary
E. (a) Name	
(b) Address (number and street)	
(c) City, State and ZIP Code	
(d) Name of Employer or Principal Place of Business	(e) Occupation

SCHEDULE 9-A
Donation(s) Received

PAGE 3 OF 6

A. Full Name of Donor Mailing Address of Donor City State Zip	Date of Receipt M M / D D / Y Y Y Y Amount , .
B. Full Name of Donor Mailing Address of Donor City State Zip	Date of Receipt M M / D D / Y Y Y Y Amount , .
C. Full Name of Donor Mailing Address of Donor City State Zip	Date of Receipt M M / D D / Y Y Y Y Amount , .
D. Full Name of Donor Mailing Address of Donor City State Zip	Date of Receipt M M / D D / Y Y Y Y Amount , .
E. Full Name of Donor Mailing Address of Donor City State Zip	Date of Receipt M M / D D / Y Y Y Y Amount , .
SUBTOTAL of Donations This Page (optional) ► , . 0.00	
TOTAL This Period (last page this line number only) ► , . 0.00 (carry total from last page to Line 9)	

SCHEDULE 9-B
Disbursement(s) Made or Obligation(s)

PAGE 4 OF 6

A. Full Name (Last, First, Middle Initial) of Payee <u>Target Enterprises, LLC</u>				Date of Disbursement or Obligation M M ' D D ' Y Y Y Y 10 ' 15 ' 2012	
Mailing Address of Payee <u>15260 Ventura Blvd., Suite 1240</u>				Amount , 924.00	
City State Zip Code <u>Sherman Oaks CA 91403</u>				Communication Date M M ' D D ' Y Y Y Y 10 ' 19 ' 2012	
Name of Employer				Occupation	
Purpose of Disbursement (Including title(s) of communication(s)) <u>Radio ad placement ("Failing Agenda - Hamilton, MT")</u>					
Name of Federal Candidate <u>Barack Obama</u>		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
B. Full Name (Last, First, Middle Initial) of Payee <u>Target Enterprises, LLC</u>				Date of Disbursement or Obligation M M ' D D ' Y Y Y Y 10 ' 15 ' 2012	
Mailing Address of Payee <u>15260 Ventura Blvd., Suite 1240</u>				Amount , 608.00	
City State Zip Code <u>Sherman Oaks CA 91403</u>				Communication Date M M ' D D ' Y Y Y Y 10 ' 19 ' 2012	
Name of Employer				Occupation	
Purpose of Disbursement (Including title(s) of communication(s)) <u>Radio ad placement ("Failing Agenda - Helena, MT")</u>					
Name of Federal Candidate <u>Barack Obama</u>		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
SUBTOTAL of Disbursements/Obligations This Page (optional) ▶				, 1,532.00	
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)				, ,	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

PAGE 5 OF 6

A. Full Name (Last, First, Middle Initial) of Payee <u>Target Enterprises, LLC</u>				Date of Disbursement or Obligation M M ' O O ' Y Y Y Y 1 0 ' 1 5 ' 2 0 1 2	
Mailing Address of Payee <u>15260 Ventura Blvd., Suite 1240</u>				Amount 1,707.00	
City <u>Sherman Oaks</u>		State <u>CA</u>		Zip Code <u>91403</u>	
Name of Employer <u>Target Enterprises, LLC</u>				Communication Date M M ' O O ' Y Y Y Y 1 0 ' 1 9 ' 2 0 1 2	
Purpose of Disbursement (Including title(s) of communication(s)) <u>Radio ad placement ("Failing Agenda - Missoula, MT")</u>					
Name of Federal Candidate <u>Barack Obama</u>		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate 		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate 		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
B. Full Name (Last, First, Middle Initial) of Payee <u>Target Enterprises, LLC</u>				Date of Disbursement or Obligation M M ' O O ' Y Y Y Y 1 0 ' 1 5 ' 2 0 1 2	
Mailing Address of Payee <u>15260 Ventura Blvd., Suite 1240</u>				Amount 1,116.00	
City <u>Sherman Oaks</u>		State <u>CA</u>		Zip Code <u>91403</u>	
Name of Employer <u>Target Enterprises, LLC</u>				Communication Date M M ' O O ' Y Y Y Y 1 0 ' 1 9 ' 2 0 1 2	
Purpose of Disbursement (Including title(s) of communication(s)) <u>Radio ad placement ("Failing Agenda - Kalispell, MT")</u>					
Name of Federal Candidate <u>Barack Obama</u>		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate 		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate 		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
SUBTOTAL of Disbursements/Obligations This Page (optional)				2,823.00	
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)				 	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

PAGE 6 OF 6

A. Full Name (Last, First, Middle Initial) of Payee <u>Emmis St. Louis</u>				Date of Disbursement or Obligation M M ' D D ' Y Y Y Y 10 19 2012	
Mailing Address of Payee <u>401 S. 18th St. Suite 100</u>				Amount , 3,610.00	
City <u>St. Louis</u>		State <u>MO</u>		Zip Code <u>63103</u>	
Name of Employer 		Occupation 		Communication Date M M ' D D ' Y Y Y Y 10 22 2012	
Purpose of Disbursement (Including title(s) of communication(s)) <u>Radio ad placement ("Gas Price Rollback - KFTK")</u>					
Name of Federal Candidate <u>Barack Obama</u>		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate 		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate 		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
B. Full Name (Last, First, Middle Initial) of Payee <u>Emmis St. Louis</u>				Date of Disbursement or Obligation M M ' D D ' Y Y Y Y 10 19 2012	
Mailing Address of Payee <u>401 S. 18th St. Suite 100</u>				Amount , 3,050.00	
City <u>St. Louis</u>		State <u>MO</u>		Zip Code <u>63103</u>	
Name of Employer 		Occupation 		Communication Date M M ' D D ' Y Y Y Y 10 22 2012	
Purpose of Disbursement (Including title(s) of communication(s)) <u>Radio ad placement ("Gas Price Rollback - KPNT")</u>					
Name of Federal Candidate <u>Barack Obama</u>		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate 		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate 		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
SUBTOTAL of Disbursements/Obligations This Page (optional)				, 6,660.00	
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)				, 11,015.00	

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify): <i>E-Mail</i>	Date of Receipt or Postmarked <i>10/23/2012</i>
<i>UB</i> PREPARER	<i>10/23/2012</i> DATE PREPARED

(3/2005)